

I. Name of Lobbyist(s):

(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

Paul A. Worsowicz; Ari B. Pollack; Lisa K. Shapiro, Ph.D.

RECEIVED

JAN 24 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT

| | | AGHER, CALLAHAN 4 North Main Street, Co | | |
|--|--|--|---|-----------------------------------|
| 603-2 | 228-1181 | 603-226-3477 | wors | sowicz@gcglaw.com |
| | ephone) | (Fax) | | (Email) |
| III. This statemen reportable expense | t covers: (Choose one - e transactions which ar | - file separate reports for e not attributable to any | r each client, OR you m one client.) | ay file a separate report for |
| X All reportab | le transactions occurring | g in the month prior to the | reporting date relative to | the following client. |
| | | ILLSBURY REALTY D | | |
| | (Full Name of Cl | ient as it appears on the Lo | obbyist Registration Form | n) |
| | ole transactions by the lo | bbyist (including the lobb | yist's family), or the lobb | oying firm listed below which are |
| IV. Date of Repor | t: April 26, 2017 | · 🗆 | July 26, | 2017 🗆 |
| Reports cover: | activity from date of re | | activity from 4/1/ | |
| • | October 25, 20 | | January | 24, 2018 🗵 |
| | activity from 7/1/17 | | activity from 10/1 | |
| V. There have been If this box is check Concord. NH 0336 | ed, complete just this for | no reportable transaction and submit it to the Sec | ns made since the last r retary of State's Office. S | eport. State House. Room 204. |
| VI. Check if add If you have | itional reports are attac received fees or made e | c hed: xpenditures, you must file | Addendum A – Fees ar | nd Expenses |
| Expense Re | eimbursement | | | - Report of Honorariums or |
| | | | ons, you must file Adde | ndum C – Political Contributions |
| I have read RSA 13 | Affirmation by Lobbyi 5. RSA 15-B and RSA 6 nowledge and belief. | st 64 and hereby swear or af | firm that the foregoing in | formation is true and complete |
| 1 | 6 bloom | · / | 1-22 | 18 |
| 4 /21. 1 | | | | |





STATE OF NEW HAMPSHIRE Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

| I. Name of Lobbyist(| s) Paul A. Worsowicz; Ari B. Pollack; Lisa K. Sl | hapiro, Pl | h.D. | |
|--|---|---|---|---|
| II. Name of lobbyist's | s partnership, firm or corporation, if any: | | | |
| | GALLAGHER, CALLAHAN & GARTRI | ELL, P.C | | |
| - | (Name of partnership, firm or corporat | | | |
| III. Name of Client | PILLSBURY REALTY DEVELOPMENT | Date | January 2 | 4, 2018 |
| lobbying, including fee | unt of all fees received from the client identified above es for services such as public advocacy, government rel nitoring legislation, and related legal work. The gross | lations, or | public relation | ons services, |
| a) Total of all fees rece | eived in this reporting period | | a) \$ | 500.00 |
| | eived this calendar year, prior to this reporting period. the total prior monthly reports for this calendar year.) | | b) \$ | 14,462.50 |
| c) Total of all fees reco (Add lines a and b) | eived to date. | | c)\$ | 14,962.50 |
| d) Indicate the amount yet been paid. | t of any such fees that are due, but have not | | d) \$ | .00 |
| fees. Separate reports lobbyist(s)/firm that ar are to be reported in creporting period for s expenses where the ex the cost was \$25.00 or purchase of a ceremon statement of each indivcovered by (a) (for exagiven to the subject o legislative reception). | partnerships, firms, or corporations are required to a are to be filed for expenditures made relative to each of the unrelated to any one client a separate report may be one of three categories of expenses: (a) the aggregalaries, benefits, support staff, and office expenses; penditure was of \$25.00 or less (for example: meals to less, purchase of a pen with a value of less than \$10 that object given to a person being lobbied with a value vidual expenditure made during this reporting period of ample: purchase of a meal with value of greater than \$10 that of the properties of a meal with value of greater than \$25. but not greater than \$ | efilent and efiled for gate total of (b) the appurchased that is give e of \$25.0 of greater than | if expenditure the lobbyist(of all expense ggregate total during a busien to the person or less): a chan \$25.00 fease of a cerer \$50, restaura | es are made by the sylfirm. Expenses es paid during the lof all individua siness lunch where son being lobbied and (c) an itemized or any purpose no monial object to be ant expenses for a |
| support staff, and office b) Total aggregate of | penses for this reporting period for salaries, benefits, the expenses, related directly or indirectly to lobbying. expenditures during this reporting period, not reported | a) b) | | 2,562.50 |
| in a), of \$25 or less. | | c) | \$ | |
| c) Total of all itemize | d expenditures reported in detail in section VI. | | | .00 |

| n m · i | | |
|--|----------------------------------|--------|
| d) Total expenses for this reporting period. (Add lines a, b and c.) | d) \$2,5 | 62.50 |
| e) Total of expenses paid this calendar year, prior to this reporting period. | | |
| (This should be the amount on line f of addendum A for last month's report.) | e) \$5,7 | 75.00 |
| f) Total of all expenses year to date. | f) \$8,3 | 337.50 |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from lob period, including by whom paid or to whom charged. | bying fees during this reporting | ng |
| Paid to: | Amount | |
| | \$ | |
| | \$ | |
| | \$ | |
| | \$ | |
| | \$ | |
| | | |
| Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm | that the foregoing informa | tion |
| is true and complete to the best of my knowledge and belief. | | |
| (Signature of lobbyist) | 1-22-18 | |
| (Signature of lobbyist) | (Date) | |
| | | |
| Paul A. Worsowicz | | |
| (Print Name of Lobbyist) | | |

Lobbyist Fees & Expenses, Addendum A - Page 2 Client: PILLSBURY REALTY DEVELOPMENT

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

| Sworn Statement/Affi Statement of Income a | | | |
|--|--|--|--|
| Name of Lobbying part | nership, firm or corpor | ration: GALLAGHER, CA | LLAHAN & GARTRELL, P.C. |
| | plank if Statement is fo illsbury Realty Devel | • | orporation and not related to any |
| Date of Report (check | one): | | |
| April 26, 2017 □ | July 26, 2017 🗆 | October 25, 2017 🗆 | January 24, 2018 🔀 |
| | | e Statement of Income and Enterneut (insert the number o | expenses described above, and the f Addendum forms being |
| 1 Addendum A(s). | | | |
| 0 Addendum B(s). | | | |
| 0 Addendum C(s). | | | |
| I hereby swear or affirm complete to the best of | | | and each Addendum is true and |
| QP5 | | | 1/22/18 |
| (Signature of Lobbyist |) | | (Date) |
| Ari B. Pollack | | | |
| (Print Name of lobbyi | st) | | |

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums

Sworn Statement/Affirmation by Lobbyist

| and Expenses for: | | | | |
|---|---|---|--|--|
| Name of Lobbying partnership, firm or corporation: GALLAGHER, CALLAHAN & GARTRELL, P.C. | | | | |
| | | orporation and not related to any | | |
| one): | | | | |
| July 26, 2017 🗆 | October 25, 2017 🗆 | January 24, 2018 🔀 | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | and each Addendum is true and | | |
| /) | | 1/23/8 (Date) | | |
| | and Expenses for: tnership, firm or corpore blank if Statement is for Pillsbury Realty Develor one): July 26, 2017 SA 15-B, RSA 664, the submitted with that Statement is foregoing information. | thership, firm or corporation: GALLAGHER, CAlblank if Statement is for the partnership, firm, or collisbury Realty Development One): July 26, 2017 October 25, 2017 SA 15-B, RSA 664, the Statement of Income and Esubmitted with that Statement (insert the number of my knowledge and belief. | | |